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FORM OF BEING OUT OF THE JOB

We request you to inform us about the staff's clear of accompanying with your department because of his/ her being out of the job, whose name is written below. In case of missing signature, the dismissal of the personnel cannot be completed.

Staff's Title, Name and Surname:

<u>Related Departments</u>	<u>Name-Surname</u>	<u>Signature</u>	<u>Accompany</u> <i>Yes / No</i>
Related Deanship or Directorship European Union			
Accounting Directorate			
Building Maintenance Supervisor, Technical Affairs			
Career and Alumni Center Directorate			
Competition Relat. Analy. and Central Plan. Directorate			
Continuous Education Center			
Finance Directorate			
Health, Culture, Sports Directorate			
Inform. Systems Integration Directorate			
Information and Technology Transfer Office			
International Office Directorate			
IT Directorate			
Library&Information Center Directorate			
Media Center Directorship			
Media Relations Coord. Directorship			
Open and Distance Learning Center			
Project Support Office			
Public Relations and Marketing Directorate			
Purchasing Directorate			
Registrar's Office Directorate			
European Union Research Center			
Student Affairs Directorate			
Support Services Directorate			

<u>For Confirmation</u>	<u>Name-Surname</u>	<u>Signature</u>	<u>Accompany</u> <i>Yes / No</i>
General Secretary			
Human Resources Directorate			

*After taken all signatures and approvals from the Departments, the signed document is submitted to the Human Resources Directorate.